

### FORM D



# UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

#### FORM D



NOTICE OF SALE OF SECURITIES
PURSUANT TO REGULATION D,
SECTION 4(6), AND/OR
UNIFORM LIMITED OFFERING EXEMPTION

OLU UUL UNLI					
Prefix	Serial				
	l				
DATE F	RECEIVED				
1					

Name of Offering ( check if this is a Matador Resources Company	n amendment and name has changed, and indicat	e change.)	
Filing Under (Check box(es) that apply	): 🔲 Rule 504 🔲 Rule 505 🖂	Rule 506  Sec	ction 4(6) ULOE
Type of Filing: ☐ New Filing ☑ Am	endment	····	
	A. BASIC IDENTIFICAT	ION DATA	
1. Enter the information requested abo	ut the issuer		
Name of Issuer ( check if this	is an amendment and name has changed, and ind	icate change.)	
Matador Resources Company	<b>5</b> ,	<i>o</i> ,	
Address of Executive Offices (Number	and Street, City, State, Zip Code)		Telephone Number (Including Area Code)
One Lincoln Centre, 5400 LBJ Freev		1	(972) 371-5200
	ons (Number and Street, City, State, Zip Code)		Telephone Number (Including Area Code)
(if different from Executive Offices) sa	me as above	}	same as above
Brief Description of Business		·	
Oil and gas exploration and production	on		
			PROCESSED
Type of Business Organization			<del>-</del>
□ corporation	<ul> <li>limited partnership, already formed</li> </ul>	other (please sp	ecify):
☐ business trust	☐ limited partnership, to be formed		ecify): JUN 0 6 2003
	Month	Year	ctual   Estimated   THUM ON FINANCIAL
Actual or Estimated Date of Incorporat	ion or Organization: 0 7	0 3 🛛 A	etual   Estimated   ENANCIAL
Jurisdiction of Incorporation or Organi	zation: (Enter two-letter U.S. Postal Service abb	reviation for State;	
.,	CN for Canada; FN for other foreign jur		X

#### GENERAL INSTRUCTIONS

#### Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When to File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below, or if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

#### State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

#### **ATTENTION**

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Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

SEC 1972 (6-02) 1 of 8

#### A. BASIC IDENTIFICATION DATA

#### 2. Enter the information requested for the following:

- Each promoter of the issuer, if the issuer has been organized within the past five years;
- Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer;
- Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and

<ul> <li>Each general and n</li> </ul>	nanaging partner of	partner issuers.			
Check box(es) that Apply:	[] Promoter	⊠ Beneficial Owner	☑ Executive Officer	□ Director	☐ General and/or Managing Partner
Full Name (Last name first, i Foran, Joseph Wm.	f individual)				
Business or Residence Addre One Lincoln Centre, 5400 LE					
Check box(es) that Apply:	☐ Promoter	⊠ Beneficial Owner		☐ Director	☐ General and/or Managing Partner
Full Name (Last name first, i King, Scott	f individual)				
Business or Residence Addre One Lincoln Centre, 5400 LE			·		
Check box(es) that Apply:	☐ Promoter	☐ Beneficial Owner		☐ Director	☐ General and/or Managing Partner
Full Name (Last name first, i Ernest, Michael G.	f individual)				
Business or Residence Addre One Lincoln Centre, 5400 LE					
Check box(es) that Apply:	☐ Promoter	☐ Beneficial Owner		☐ Director	☐ General and/or Managing Partner
Full Name (Last name first, i Muth, Robert L.	f individual)				
Business or Residence Addre One Lincoln Centre, 5400 LE					
Check box(es) that Apply:	☐ Promoter	☐ Beneficial Owner		☐ Director	☐ General and/or Managing Partner
Full Name (Last name first, i Wayne, Kathy	f individual)				
Business or Residence Addre One Lincoln Centre, 5400 LE	•				
Check box(es) that Apply:	☐ Promoter	☐ Beneficial Owner		☐ Director	☐ General and/or Managing Partner
Full Name (Last name first, i Hoevers, Yvonne	f individual)				
Business or Residence Addre One Lincoln Centre, 5400 LE					
Check box(es) that Apply:	☐ Promoter	☐ Beneficial Owner		☐ Director	☐ General and/or Managing Partner
Full Name (Last name first, i Robinson, Bradley M.	f individual)				
Business or Residence Addre One Lincoln Centre, 5400 LI	ess (Number and Str 3J Freeway, Suite 1	reet, City, State, Zip Code) 500, Dallas, Texas 75240			

## A. BASIC IDENTIFICATION DATA

#### 2. Enter the information requested for the following:

- Each promoter of the issuer, if the issuer has been organized within the past five years;
- Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer;
- Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and

<ul> <li>Each general and m</li> </ul>	nanaging partner of	partner issuers.			
Check box(es) that Apply:	[] Promoter	☐ Beneficial Owner		☐ Director	☐ General and/or Managing Partner
Full Name (Last name first, i Lancaster, David E.	f individual)				
Business or Residence Addre One Lincoln Centre, 5400 LE					
Check box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	☑ Director	☐ General and/or Managing Partner
Full Name (Last name first, i Funk, James M.	f individual)				
Business or Residence Addre P.O. Box 198, Blackburn Ro					
Check box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	☑ Director	☐ General and/or Managing Partner
Full Name (Last name first, i Holditch, Stephen A.	f individual)				
Business or Residence Addre Petroleum Engineering Dept.			v, 3116 TAMU, College Stati	on, Texas 77843-3	116
Check box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	□ Director	☐ General and/or Managing Partner
Full Name (Last name first, i Laney, David	f individual)				
Business or Residence Addre Jackson Walker, LLP, 901 M					
Check box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	□ Director	☐ General and/or Managing Partner
Full Name (Last name first, i McMichael, Greg L.	f individual)				
Business or Residence Addre 2562 Country Club Court, W					
Check box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	☑ Director	☐ General and/or Managing Partner
Full Name (Last name first, i Ohnimus, Steve	f individual)				
Business or Residence Addre 134 Palm Boulevard, Missou		59			
Check box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	☐ Director	☐ General and/or Managing Partner
Full Name (Last name first, i Scott, Jr., Edward R.	f individual)				
Business or Residence Addre					

# A. BASIC IDENTIFICATION DATA 2. Enter the information requested for the following: • Each promoter of the issuer, if the issuer has been organized within the past five years;

• Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer;

• Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and

<ul> <li>Each general and n</li> </ul>	nanaging partner of	partner issuers.	0 01	•	•
Check box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	□ Director	☐ General and/or Managing Partner
Full Name (Last name first, i VanBenschoten, David	f individual)				
Business or Residence Addre General Mills, Inc., One Gen	ess (Number and Streeral Mills Boulevard	eet, City, State, Zip Code) d. Minneapolis, Minnesota 5	5426		
Check box(es) that Apply:	[] Promoter	☐ Beneficial Owner	☐ Executive Officer	☐ Director	☐ General and/or Managing Partner
Full Name (Last name first, i	f individual)				
Business or Residence Addre	ss (Number and Str	eet, City, State, Zip Code)			
Check box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	Director	☐ General and/or Managing Partner
Full Name (Last name first, i	f individual)				
Business or Residence Addre	ss (Number and Stre	eet, City, State, Zip Code)			
Check box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	Director	☐ General and/or Managing Partner
Full Name (Last name first, i	f individual)				
Business or Residence Addre	ss (Number and Stre	eet, City, State, Zip Code)			
Check box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	☐ Director	☐ General and/or Managing Partner
Full Name (Last name first, i	f individual)				
Business or Residence Addre	ss (Number and Stre	eet, City, State, Zip Code)			
Check box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	☐ Director	☐ General and/or Managing Partner
Full Name (Last name first, in	f individual)				
Business or Residence Addre	ss (Number and Stre	eet, City, State, Zip Code)			
Check box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	☐ Director	General and/or Managing Partner
Full Name (Last name first, if	f individual)				
Business or Residence Addre	ss (Number and Stre	eet, City, State, Zip Code)			
<del></del>					

B. INFORMATION ABOUT OFFERING Yes No 1. Has the issuer sold or does the issuer intend to sell, to non-accredited investors in this offering?  $\boxtimes$ Answer also in Appendix, Column 2, if filing under ULOE. 2. What is the minimum investment that will be accepted from any individual? \$30,000 Yes No 3. Does the offering permit joint ownership of a single unit?  $\boxtimes$ 4. Enter the information requested for each person who has been or will be paid or given, directly or indirectly, any commission or similar remuneration for solicitation of purchasers in connection with sales of securities in the offering. If a person to be listed is an associated person or agent of a broker or dealer registered with the SEC and/or with a state or states, list the name of the broker or dealer. If more than five (5) persons to be listed are associated persons of such a broker or dealer, you may set forth the information for that broker or dealer only. Full Name (Last name first, if individual) N/A Business or Residence Address (Number and Street, City, State, Zip Code) Name of Associated Broker or Dealer States in Which Person Listed Has Solicited or Intends to Solicit Purchasers [AL] [AK] [AZ] [AR] [CA] [CO] GA] [CT] □ [DE] [DC] [FL] [HI] [IL] [IN]  $\square$  [IA]  $\square$  [KS] [KY] [LA] [IM][MN][MS] [] [ME] [MD] [MA]  $\prod [MT]$ [NE] [NV][HN] [[NJ]][ NM ] ☐ [NY] [NC] ☐ [ND] [OH] [OK] [OR] [PA] □ [RI]  $\square$  [SC]  $\square$  [SD] TN]  $\prod \{TX\}$ UT] □ [VA] [WA] [\wv] [WI] [YW][TV] Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Name of Associated Broker or Dealer States in Which Person Listed Has Solicited or Intends to Solicit Purchasers [AL] [AK]  $\square$  [AZ]  $\square$  [AR] [CA] [CO] [CT] [DE] [DC] [FL] □ [GA] [HI] [][IL]  $\square$ [IN] [] [IA] [KS] [KY][LA] [ME] [MD] [ MA] [][M][MM] $\square$  [MS] [TM]  $\square$  [NE] [NV]□ [NH] [UN] [MM] [YN] [NC] [MD] [HO] [OK] [OR] □ [PA] □ [RI] [SC]  $\square$  [SD] [UT] [WV] [TN] [XT][TV] [ [VA] [WA]  $\square$  [WI] [WY] [PR] Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code)

Name of Associated Broker or Dealer

States in 1	States in Which Person Listed Has Solicited or Intends to Solicit Purchasers  Check "All States" or check individual States)											
(Check "A	All States" o	or check ind	lividual Sta	tes)				•••••		🗆 All	States	
[AL]	[AK]	$\square$ [AZ]	[AR]	[CA]	[CO]	CT]	[DE]	[DC]	[FL]	[GA]	[] [HI]	[ID]
[IL]	$\square$ [IN]	[AI]	[KS]	[KY]	[LA]	[ME]	[MD]	[ AM ]	[MI]	[MN]	[MS]	[MO]
[MT]	[NE]	[NV]	[NH]	[ЦИ]	[MM]	$\prod [NY]$	[NC]	[ND]	[HO]	[OK]	[OR]	[PA]
[RI]	[sc]	[ds]	[TN]	[XT]	UT)	[TV]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]

# C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero". If the transaction is an exchange offering, check this box \( \square\$ and indicate in the column below the amounts of the securities offered for exchange and already exchanged.	••			
Type of Security				
Debt	\$		\$	
Equity	\$41,000	,000	\$ <u>40</u>	<u>890,996</u>
☐ Common ☐ Preferred				
Convertible Securities (including warrants)	\$		\$	<del></del>
Partnership Interests	\$		\$	<del></del>
Other (Specify)	\$		\$	
Total	\$ 41,000	0,000	\$ <u>40</u>	<u>,890,996</u>
Answer also in Appendix, Column 3, if filing under ULOE				
Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."			Dollar	regate Amount
	102		_	
· · · · · · · · · · · · · · · · · · ·	N/A		- <sub>2</sub>	IN/A
-				
If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C-Question 1.  Type of Offering				Amount Sold
Rule 505		•	\$	N/A
-				
. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in				
may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.				
may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an			\$	2,392
may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.			\$ \$	
may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.  Transfer Agent's Fees	,			
may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.  Transfer Agent's Fees  Printing and Engraving Costs			\$ \$	4,560
may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.  Transfer Agent's Fees  Printing and Engraving Costs  Legal Fees			\$ \$ \$	4,560 34,606
may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.  Transfer Agent's Fees  Printing and Engraving Costs  Legal Fees  Accounting Fees			\$ \$ \$	4,560 34,606 3,500
may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.  Transfer Agent's Fees  Printing and Engraving Costs  Legal Fees  Accounting Fees  Engineering Fees			\$ \$ \$ \$	4,560 34,606 3,500
i	Enter "0" if answer is "none" or "zero". If the transaction is an exchange offering, check this box and indicate in the column below the amounts of the securities offered for exchange and already exchanged. Type of Security  Debt	Enter "0" if answer is "none" or "zero". If the transaction is an exchange offering, check this box and indicate in the column below the amounts of the securities offered for exchange and already exchanged.  Type of Security  Debt  Equity  Solution Preferred  Convertible Securities (including warrants)  Partnership Interests  Other (Specify)  Total  Answer also in Appendix, Column 3, if filing under ULOE  Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."  Numb  Accredited Investors  Non-accredited Investors  Non-accredited Investors  Non-accredited Investors  Total (for filings under Rule 504 only)  Answer also in Appendix, Column 4, filing under ULOE  If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C-Question 1.  Type of Offering  Regulation A  Rule 505  Regulation A  N/A  N/A  Purnish a statement of all expenses in connection with the issuance and distribution of the securities in	Enter "0" if answer is "none" or "zero". If the transaction is an exchange offering, check this box and indicate in the column below the amounts of the securities offered for exchange and already exchanged.  Type of Security  Debt	Enter "0" if answer is "none" or "zero". If the transaction is an exchange offering, check this box   and indicate in the column below the amounts of the securities offered for exchange and already exchanged.  Type of Security    Debt

	total expenses furnished in response to	egate offering price given in response to Part C-Question Part C-Question 4.a. This difference is the "adjuste	d gross			\$40,837,497
	of the purposes shown. If the amount for	il gross proceeds to the issuer used or proposed to be used any purpose is not known, furnish an estimate and check the payments listed must be equal to the adjusted gross propulation 4 by above	the box			
	are issued see total in response to fair o-c	guestien 4.0. aubve.		O Dire	ments to fficers, ectors, & ffiliates	Payments To Others
	Salaries and fees			\$	□	\$
	Purchase of real estate			\$		\$
	Purchase, rental or leasing and insta	allation of machinery and equipment		\$		\$
	Construction or leasing of plant bui		\$	🗆	\$	
	Acquisition of other businesses (in may be used in exchange for the as		s		\$	
	Repayment of indebtedness			S		\$
	Working capital		🗵	\$ 450	0.000 🖾	s2,500,000
	Other (specify) Acquisition of pro		\$		\$ 37,887,497	
		oment drilling activities and production costs				
				S	🗆	so
	Column Totals					\$ 40,387,497
		als added)				40,837,497
		D. FEDERAL SIGNATURE				
Th.	in the state of the state of the state of the			. 61	ada a Dula	FOE the Calleurine
sig	nature constitutes an undertaking by the i	signed by the undersigned duly authorized person. If this issuer to furnish to the U.S. Securities and Exchange Connected investor pursuant to paragraph (b) (2) of Rules	nmission,			
Íss	uer (Print or Type)	Signature	Date			
Ма	tador Resources Company	Wand & Threat	May 5, 20	05		
Na	me of Signer (Print or Type)	Title of Signer (Print or Type)				
	vid E. Lancaster	Vice President and Chief Financial Officer				

#### **ATTENTION**

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)